## P21000093544

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ISAAC MOLINA	HI INC				
DOCUMENT NUME	P2100000354A					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	atter to the following:				
	Isaac Molina III					
	Name of Contact Person					
		Firm/ Company				
	10376 ROSEMOUNT DR					
	Address					
	TAMPA, FL 33624					
	City/ State and Zip Code					
	isaac@lombardoheights.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	concerning this matter, plea	se call:				
Isaac Molina		at (8) 3	317.1861			
Name o	f Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

FILED

ISAAC MOLINA III INC

2021 NOV 29 AM 11: 21

ISANC MODINA III INC	fort
(Name of Corporation as	currently filed with the Florida Dept. of Stafe) A E
P21000093544	tăii Aaseeleur ar
(Document )	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statts Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpor	ration:
SAAC MOLINA III PA	
	The new vation, ""company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word on "P.A."
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRES</u>	<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent	
	Florida street address)
New Registered Office Address:	(City), Florida(Zip Code)
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am	
Signature	of New Registered Agent, if changing
Signature	oj riew kegimerea Agem, ij changing

## Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3 ) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Adđ				
Remove				

E. If amending of (Attach addition	r adding additional Articleral sheets, if necessary).	es, enter change (Be specific)	(s) here:		
	to PA. Real Estate Agent				
				·	
			<u> </u>		
			<u> </u>		
					· · · · · · · · · · · · · · · · · · ·
., .					
				<del></del>	
. If an amendme	ent provides for an exchar	nge, reclassificat	ion, or cancellation	on of issued shares	i <u>.</u>
provisions for	implementing the amend	lment if not cont	tained in the ame	ndment itself:	
(ij noi apį	olicable, indicate N/A)				
				· · · · · · · · · · · · · · · · · · ·	

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The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file dat	e)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requireme Department of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The number of votes cast for the a sufficient for approval.	mendment(s)
	approved by the shareholders through voting groups. The follow or each voting group entitled to vote separately on the amendm	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
11/17/21 Dated Signature		
(By a selec	director, president or other officer - if directors or officers hav ted, by an incorporator - if in the hands of a receiver, trustee, or inted fiduciary by that fiduciary)	
ајук		
	Isaac Molina III	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	